



Commonwealth of Massachusetts
DIVISION OF PROFESSIONAL LICENSURE
Board of Examiners of Sheet Metal Workers
1000 Washington Street, Suite 710,
Boston, Massachusetts 02118-6100

STATEMENT OF THE EMPLOYING MASTER SHEET METAL WORKER:

I _____
(Please Print Name of Employing Master Sheet Metal Worker) (License Number)

Operating a Sheet Metal Company under the business firm name of

Located at:

(Address) (City/Town) (State) (Zip Code)

Telephone Number: _____ - _____ - _____ do hereby make application to register

_____ as an apprentice sheet
(Please Print Name of Apprentice Applicant)

metal worker. I hereby certify that the apprentice will be employed by me and will work under the direct supervision of a journeyman sheet metal worker in my employ in accordance with the provisions of 271 CMR 5.02 (2). I have verified that all of my employees possess a current license in good standing with the Board of Examiners. I hereby certify that the previous statements are true and are made under the pains and penalties of perjury.

Signature of Employing Master Sheet Metal Worker:
